



## OFFICE OF THE SECRETARY OF STATE

JESSE WHITE-Secretary of State

7355-505-1

APRIL 18, 2022

NORTHWEST REGISTERED AGENT SERVICES, INC.  
2501 CHATHAM RD STE N  
SPRINGFIELD, IL 62704

RE ELEVATED ACCESS, INC.

DEAR SIR OR MADAM:

ENCLOSED YOU WILL FIND THE ARTICLES OF INCORPORATION OF THE ABOVE NAMED CORPORATION. THE CORPORATION IS REQUIRED TO FILE AN ANNUAL REPORT EACH YEAR. BLANK FORMS WILL BE MAILED BY THIS OFFICE TO THE REGISTERED AGENT AS SHOWN BY OUR FILES APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH. (ORIGINAL DATE OF INCORPORATION).

THE REQUIRED FEE OF \$50.00 IN THIS CONNECTION HAS BEEN RECEIVED AND PLACED TO YOUR CREDIT.

CERTAIN NOT FOR PROFIT CORPORATIONS ORGANIZED AS A CHARITABLE CORPORATION ARE REQUIRED TO REGISTER WITH THE OFFICE OF THE ATTORNEY GENERAL. UPON RECEIPT OF THE ENCLOSED ARTICLES OF INCORPORATION, YOU MUST CONTACT THE CHARITABLE TRUST DIVISION, OFFICE OF THE ATTORNEY GENERAL, 100 W. RANDOLPH, 11TH FLOOR, CHICAGO, ILLINOIS 60601 TELEPHONE (312) 814-2595.

THE ISSUANCE OF THE ARTICLES OF INCORPORATION DOES NOT ENTITLE THE CORPORATION TO A PROPERTY TAX EXEMPTION. YOU MUST APPLY FOR THAT EXEMPTION THROUGH THE BOARD OF REVIEW IN THE COUNTY WHERE THE REAL ESTATE IS LOCATED.

SINCERELY,

JESSE WHITE  
SECRETARY OF STATE  
DEPARTMENT OF BUSINESS SERVICES  
CORPORATION DIVISION  
TELEPHONE (217) 782-6961

FORM **NFP 102.10** (rev. Dec. 2003)  
**ARTICLES OF INCORPORATION**  
General Not For Profit Corporation Act

Secretary of State  
Department of Business Services  
501 S. Second St., Rm. 350  
Springfield, IL 62756  
217-782-9522  
ilsos.gov

Remit payment in the form of a  
cashier's check, certified check,  
money order, or Illinois attorney's  
or C.P.A.'s check payable  
to Secretary of State.

**FILED**  
APR 18 2022  
JESSE WHITE  
SECRETARY OF STATE

File #

7355-5051

Filing Fee: \$50

Approved:

mp

----- Submit in duplicate ----- Type or print clearly in black ink ----- Do not write above this line -----

**Article 1.**

Corporate Name: Elevated Access, Inc.

**Article 2.**

Name and Address of Registered Agent and Registered Office in Illinois:

Registered Agent: Northwest Registered Agent Service, Inc.

First Name

Middle Name

Last Name

Registered Office: 2501

Chatham Rd.

Suite N

Number

Street

Suite # (P.O. Box alone is unacceptable)

Springfield

IL

62704

Sangamon

City

ZIP Code

County

**Article 3.**

The first Board of Directors shall be 3 in number, their Names and Addresses being as follows.

Not less than three

Director Name	Street Address	City	State	ZIP Code
Michael Bohlmann	3702 Summer Sage Ct.	Champaign	IL	61822
Thomas Whisenand	2805 E. 49th St.	Minneapolis	MN	55417
Patricia Daschbach	4458 N. Albany Ave. #3	Chicago	IL	60625

**Article 4.**

Purpose(s) for which the Corporation is organized:

Charitable

(continued on back)

**Article 5.**

Other provisions (**For more space, attach additional sheets of this size.**):

**Article 6.**

Is this Corporation a Condominium Association as established under the Condominium Property Act? (check one)

☐ Yes ☒ No

Is this Corporation a Cooperative Housing Corporation as defined in Section 216 of the Internal Revenue Code of 1954? (check one)

☐ Yes ☒ No

Is this Corporation a Homeowner's Association, which administers a common-interest community as defined in subsection (c) of Section 9-102 of the code of Civil Procedure? (check one)

☐ Yes ☒ No

**Article 7.****Names & Addresses of Incorporators**

The undersigned incorporator(s) hereby declare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated April 13, 2022  
Month Day Year

**Signatures and Names**

1.   
Signature

Michael Bohlmann  
Name (print)

2. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (print)

3. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (print)

**Post Office Address**

1. 3702 Summer Sage Ct.  
Street

Champaign, IL 61822  
City, State, ZIP

2. \_\_\_\_\_  
Street

\_\_\_\_\_  
City, State, ZIP

3. \_\_\_\_\_  
Street

\_\_\_\_\_  
City, State, ZIP

**Signatures must be in BLACK INK on the original document.**

**Carbon copies, photocopies or rubber stamped signatures may only be used on the duplicate copy.**

- If a corporation acts as incorporator, the name of the corporation and the state of incorporation shall be shown and the execution shall be by a duly authorized corporate officer. Please print name and title beneath the officer's signature.
- The registered agent cannot be the corporation itself.
- The registered agent may be an individual, resident in Illinois, or a domestic or foreign corporation, authorized to act as a registered agent.
- The registered office may be, but need not be, the same as its principal office.
- A corporation that is to function as a club, as defined in Section 1-3.24 of the "Liquor Control Act" of 1934, must insert in its purpose clause a statement that **it will comply with the state and local laws and ordinances relating to alcoholic liquors.**

**Return to:**

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Attention

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City, State, ZIP

## **Attachment to Form NFP 102.10**

### **Article 5 - Other Provisions**

The following language relates to the corporation's tax-exempt status and is not a statement of purpose and powers. Consequently, this language does not expand or alter the corporation's purpose or powers set forth in Article FOUR.

Upon the dissolution of this organization, assets shall be distributed to MAC, located at PO box 408363, Chicago, IL 60640, EIN: 47-2160618, as long as the named organization maintains exempt status within the meaning of section 501(c)(3).

Alternatively, assets shall be distributed to one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the federal government, or to a state or local government, for a public purpose.